Standardization of the Australian Medical Data Exchange Model

Michael Legg PhD







- The National eHealth Program
- Pathology in Australia
- Standardisation in Australia
- Some projects

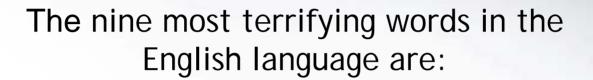
Communication

Any meaningful exchange of utterances depends upon the prior existence of an agreed upon set of <u>semantic</u> and <u>syntactic</u> rules

ISO TR9007:1987 Information Processing Systems – Concepts and Technology for the Conceptual Schema and the Information Base

That seems straight forward...

- For systems this has to occur at
 - The business level with rules for exchange
 - The information or semantic level so that computers are capable of recognising and intelligently interpreting the information which is exchanged
 - The technical level messaging, connectivity, technical solutions etc.



'I'm from the government and I'm here to help.'

Ronald Reagan

HIMSS 07

Successful E - Health Transitions:

Australia's E- Health Initiatives

Dr Ian Reinecke, CEO

National E-Health Transition Authority Australia



Acting nationally to accelerate healthcare reform

- Supporting a national approach by forming a single entity to:
 - Develop the standards, specifications, terminologies and formats to enable interoperability
 - Fund the 'missing pieces' of infrastructure in healthcare identifiers and clinical terminology
 - Develop the national policies required to protect privacy and patient consent
 - Establish a basis for modelling benefits from e-health to assist in assigning investment priorities

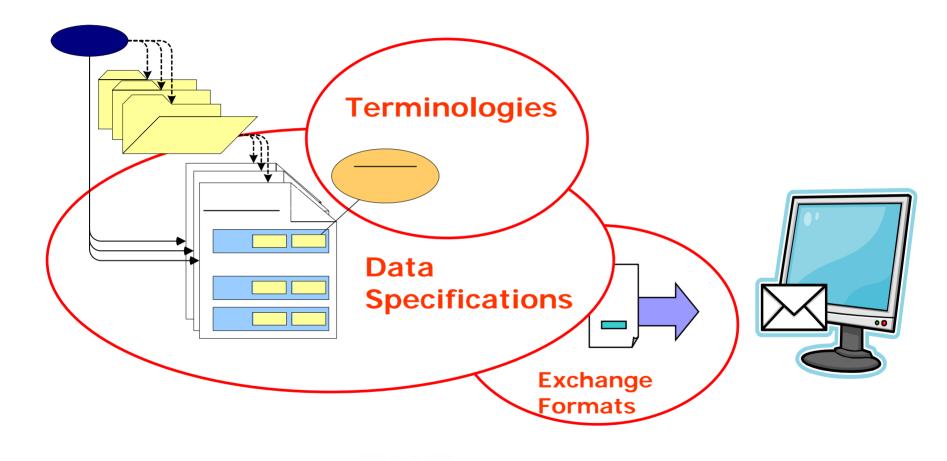


Key elements of NEHTA's work program

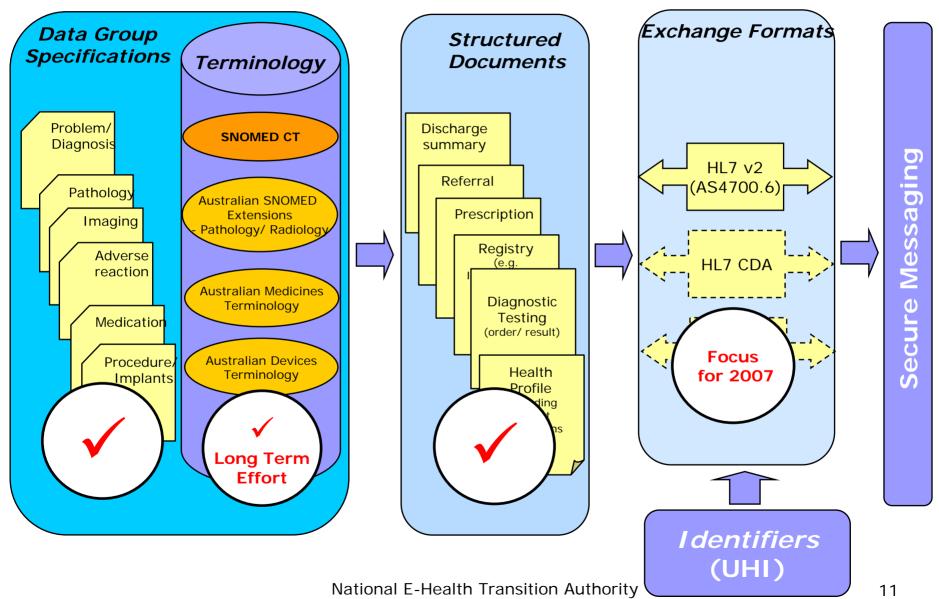
- Benefits Seeking to identify the greatest benefits for least cost, in the shortest time, with least risk
- Identifiers Uniquely identifying individuals and healthcare providers across Australia
- Terminologies Exchanging clinical information electronically, using a common language with consistent terms, descriptions and formats
- Shared EHR Designing a national system of shared electronic health records for authorised practitioners and consumers

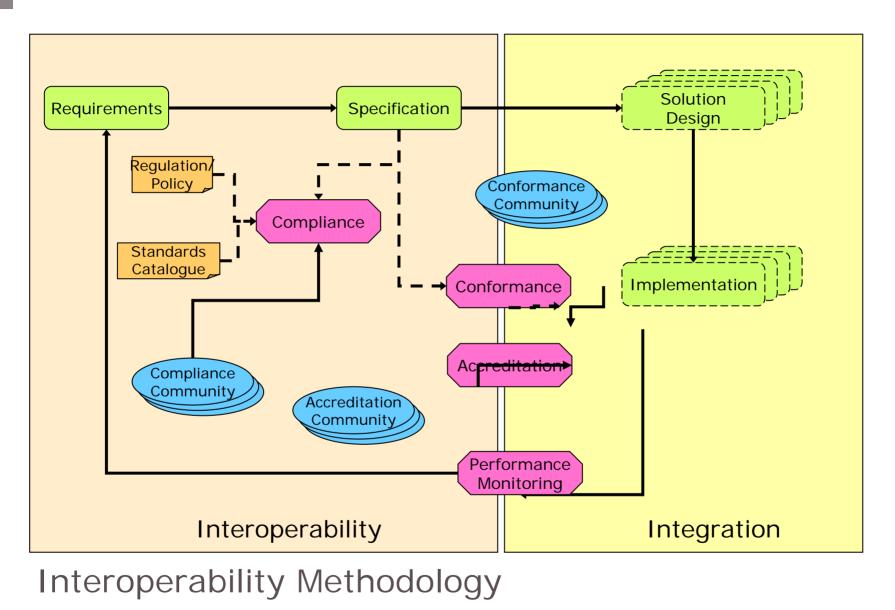


Terminologies – interoperability in clinical information

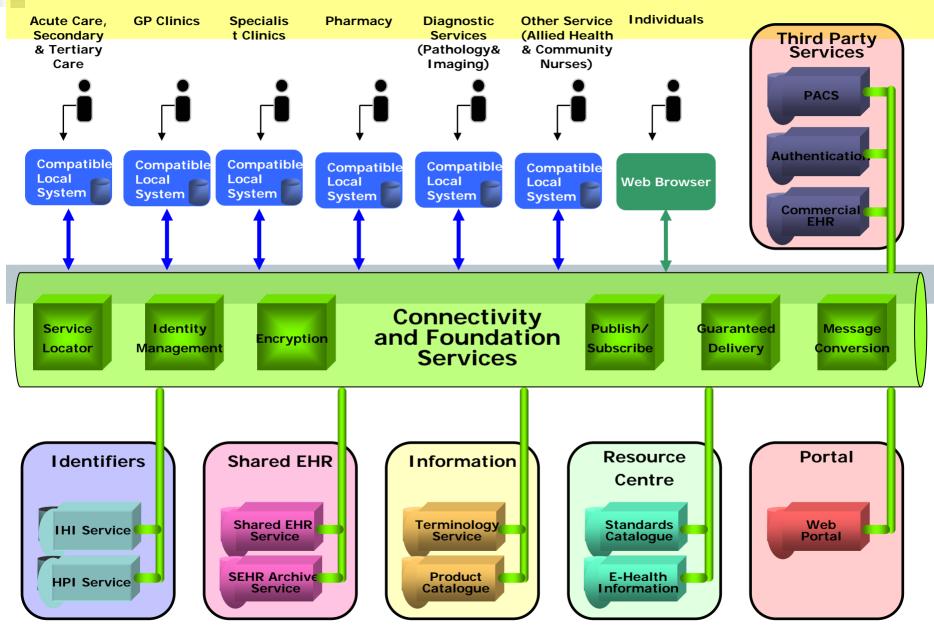


Terminologies – Nehta's work plan





National E-Health Transition Authority



National E-Health Transition Authority

Pathology in Australia

- A mix of Private/Public Hospital/Standalone
- There has been 10 years of consolidation of pathology practices public & private
- Top 3 private labs now do around 80% of community pathology and a fair swag of hospital pathology
- 2 out of 3 pathology organisations are also top 3 in diagnostic imaging
- One of those (Sonic) is now in New Zealand, Germany and the US

Pathology in Australia

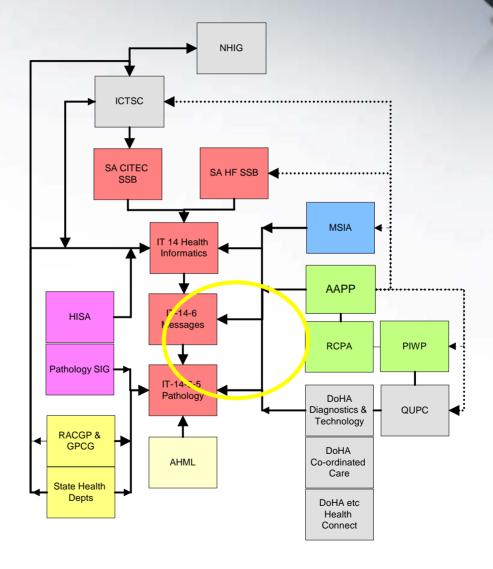
- Apart from a few AP labs both CP and AP is done in the same place and billed under the same schedule
- More than 90% of pathology is paid directly or indirectly by Government
- Practices are prevented from sub-contracting esoteric tests are passed on but billed by the lab that does the work
- There are effective industry associations that negotiate fees - AAPP & ADIA

Pathology in Australia

- More than 80% of primary care physicians use desktop software
- Most pathology reports are sent electronically
- Most community doctors order pathology with their practice systems

Standardisation in Australia

Governance of Pathology Informatics Standards Development



Standardisation in Australia

- NEHTA (National Ehealth Transition Authority) Identifiers, Terminology (SNOMED SDO), Data Definitions, Shared EHR, Pathology Business Requirements
- Standards Australia Implementation Guides, Security, Identification, Telemedicine
- HL7 Australia Affiliate to HL7.org, HL7 SOA SIG, Profile Development
- NPAAC (National Pathology Accreditation Advisory Council) *Requirements for Information Exchange*

Standardisation in Australia

- AAPP (Australian Association of Pathology Practices) – Industry Privacy Policy, Business Requirements
- AIHW (Australian Institute of Health and Welfare) Statistical Data Definitions, National Data Dictionary, METeOR
- NCCH (National Centre for Classification in Health) – ICD-10AM

Messaging Standards

Constraints

Versions

(published Standards)

National Layer (published Standards)

Domain Layer (Guidelines & Handbooks)

Leedback

Implementation Layer (project spec's)

Standards hierarchy HL7 V2.3.1 AS 4700.2 Pathology Orders and Results HB 262 Pathology electronic messaging ... Implementation Guide Pathology Code Sets **PaGSIP Implementations**

Health standards should

⇒ Save money
 ⇒ Save time
 And/or

Improve health outcomes

Projects

- NEHTA Data Definitions
- SNOMED Pathology Subsets
- AAPP Privacy Policy
- Evaluation of Electronic Decision Support Systems
- Registry Reporting Cancer & Communicable
- Lymphoma Wizard
- AAPP RFP for Communications
- Australian Healthcare Messaging Laboratory
- Interoperability Demonstration

NEHTA Data Definitions

Clinical Information Data Specification v1.1 - Index

nehta

search... National E-Health Transition Authority Advanced About NEHTA Our Work News and Events Home • Publications • Our Work • Clinical Communications • Clinical Information Data Specifications Main Menu Publications **Clinical Information Data Specifications** Employment Links Contains general information about NEHTA's clinical information work, including fact sheets, clinical information specifications and guides for use. Privacy Standards Catalogue Contacts Standards Catalogue v2.0 Dr Eric Browne - Clinical Information Email Fact Sheets **Hits Published** Down 368 19/08/2006 Details & Feedback Clinical Information Fact Sheet load **Hits** Published **Context and Strategic Direction** Project Report: Priority Event Summaries and Code Sets, and Jurisdictional Gap Analysis Down 1250 16/06/2005 Details & Feedback v1.2 load **Hits Published** Information Specifications, Content and Requirements Down Clinical Information Data Specification v1.1 1583 17/06/2005 Details & Feedback load

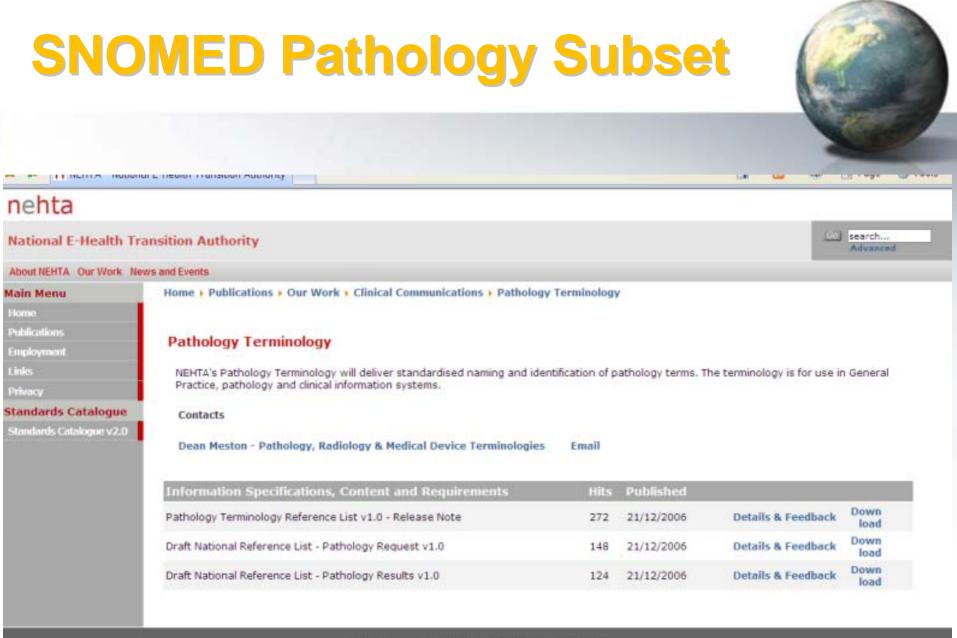
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The National Privacy Principles – Protecting privacy throughout the PATHOLOGY information life cycle

- Individual (subject)
- •Requester (& staff)
- Responsible person
- •Other health service providers including hospitals, clinics & other pathology practices
- Internal records

 Insurers & institutions

•Government instrumentalities including Department of Veterans Affairs, Transport Accident Commission (Vic), Workcover, Prison, Police, Courts...

•Organisations eg Commercial & Occupational Health such as in mining

Collecting Information

Pathology is a specialist medical service

NPP 1 – Collection

Information is collected to:

•Link pathology reports to individuals & their health care providers

- •Ensure appropriate testing
- •Make a diagnosis & interpret results

•Seek confirmation or to fulfil testing requirements from third parties where appropriate

•Have available for future reference in determining trends or significant changes

- Allow billing & payments
- •Fulfil regulatory & public health requirements

•Assure quality & improve processes

NPP 10 - Sensitive Information

Sensitive information is collected, stored, used and accessed with due regard for privacy in accordance with the "Privacy Policy in Community Pathology' published by the AAPP

•An individual can choose to suppress some information & to limit the transfer of reports to specified parties

•In some circumstances responsible persons can give consent for individuals

<u>NPP 8 – Anonymity</u>

An individual may have a test anonymously but this can be dangerous. An individual choosing to do this must be aware of the potential consequences including that:

•Diagnosis and advice may be seriously impaired with consequent adverse medical outcomes

•There may be a mismatching of the individual's results

•There must be an acceptance that there is a consequent limitation to the liability of the pathology practice

- •It may result in breakdown in good public health practice
- •It can not be claimed under Medicare

Storage & Maintenance

NPP 3 – Data Quality

•Every effort is made to keep an individuals information accurate, up to date and complete

•You are entitled to see your records and change them to improve the accuracy of the information

NPP 4 – Data Security

•Pathology information has restricted access and any changes are tracked

•Accreditation of pathology laboratories requires physical and electronic security of information

Access (by the individual)

NPP 6 – Access & Correction

•The preferred way to get your pathology results is in a consultation with your doctor, where results can be explained in the context of your health management

- •Individuals do, however, have the right of access to their pathology records
- •A written request is required and depending on how old the information is there may be charge
- •Information collected or generated before 21 December 2001 may not be available
- •To protect your privacy individuals may require positive identification

Use of Information and Disclosure

Use of information within the organisation and disclosure to third parties

<u>NPP 2 – Use & Disclosure and</u> <u>NPP 9 – Transborder Data</u> <u>Flows</u>

•Information is used within the laboratory for producing results and advice and delivering these to your specified health providers

•In the routine pathology process health information may be disclosed to another provider for the purposes of getting a second opinion or where the test is a special one, the test (with the associated information) may be referred to another more appropriate laboratory

•In very rare instances this may be outside of Australia in which case your privacy will continue to be protected

•There are some statutory requirements for reporting test results to registries

•Information is used for billing

NPP 7 – Identifiers

•Government identifiers are used where necessary for billing

•Any identity information may be used by a pathology practice to ensure that an individual and their results are linked with confidence

Openness <u>NPP 5 – Openness</u>

The Australian Association of Pathology Practices (AAPP) and its members have produced a document 'Privacy Policy in Community Pathology' describing best practice in privacy in this area. The AAPP believes the policies are compliant with the Privacy Amendment (Private Sector) Act 2000. This diagram is an extract.

UNSW Centre	for Health Informatics	Enter Search Text
About CHI	Research Programs Publications News Seminars People	PhD Studies
UNEW Faculty of Medicine Centre for Health Informatics AHIC EDSS Guidelines Introduction Guidelines Resources Glossery	Australian Health Informatics Council (AHIC) EDSS Guidelines Evaluation of electronic decision support systems The National Electronic Decision Support Taskforce report "Electronic Decision Support for Australia"s Health Sector" (published January 2003, available at http://www.health.gov.au/healthonline/publications/publications.html#Pub02) identified the need for evaluation of electronic decision support systems (EDSS). In particular the importance of promoting evaluation of the efficacy and effectiveness of electronic decision support systems as a matter of course, using rigorous and validated methodologies. It would be difficult to propose a single evaluation methodology that meets the diverse needs of the EDSS community. Different user groups have different evaluation tasks and objectives (depending on factors such as the stage of system development, intended goals for the system). By providing a set of evaluation guidelines this web site is the initial stage in promoting the evaluation of EDSS. Over time this initial set will be added to in what is hoped to be an evolving resource for the EDSS community.	Centre for Health Informatics Postal Address Centre for Health Informatics University of New South Wales Coogee Campus Sydneyr NSW 2052
	Guideline development The topics of these guidelines are based upon typical EDSS evaluation questions. These questions were identified during focus groups and individual interviews with those involved in the development, purchase and evaluation of EDSS. The Centre for Health Informatics, University of New South Wales, authored these guidelines based on experience, literature reviews and consultations with local and international experts in the field. The intended audience of these guidelines are novices at evaluation of EDSS, rather than experts. The aim of the guidelines is to raise the understanding of topic areas, with pointers to useful journal references, books and web sites for those seeking more information. They are not intended to cover every aspect of each topic, but to stimulate thinking around key techniques and to foster an anoregiation of the importance of evaluation.	Street Address Centre for Health Informatics University of New South Wale: Cliffbrook House 45 Beach St Coogee NSW 2034 T +61 (2) 9385 9003/9004 F +61 (2) 9385 9006 E chi@unswiedu.au

Registry Reporting - Cancer

Cancer eNotification in NSW



Registry Reporting -Communicable

NSW Procurement - Contracting Services is a Business Unit of the NSW Department of Commerce

NSW Procurement - Contracting Services invites this tender for and on behalf of the NSW Government State Contracts Control Board

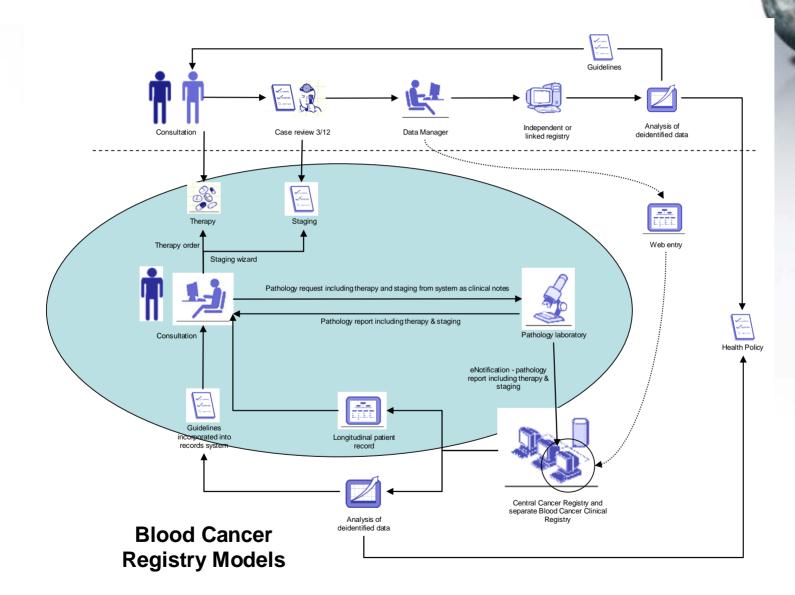
REQUEST FOR TENDER

RFT Number 0602827

Provision of a Notifiable Conditions Information Management System for NSW Department of Health

Tender Issue Date: Monday 19 February 2007

Lymphoma Wizard





Australian Healthcare Messaging Laboratory

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about ahml	Í				
message testing					
certification					Australian Healthcare Messaging Laboratory
help					Australian Healthcare Messaging Laboratory

welcome

Welcome to the Australian Healthcare Messaging Laboratory (AHML) website

This website is designed to provide potential clients with information regarding the services offered by AHML and give clients the opportunity to register as a user of AHML.

AHML is part of the Collaborative Centre for eHealth (CCeH) at the University of Ballarat and is a world class on-line testing laboratory for the technical evaluation and certification of electronic messages in healthcare applications.

AHML has been accredited by the National Association of Testing Authorities in the field of Information Technology for the testing of healthcare messages. AHML is therefore a trustworthy means of ensuring that your messages meet required standards.

There are two services offered by AHML:

The ALIAN Marcane Testine conversion and according to the many human of alectronic

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NATA Re-accreditation	
Tuesday, 19-Dec-06	
Over the last year AHML has un rigorous re-accreditation proc Read more	
AHML Hardware / Software / Completed	Upgrade
Monday, 20-Nov-06	
The change over to the new A been successfully completed Read more	The second second second second
New Test Profile for AHML	
Tuesday, 13-Jun-06	
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The Internet	120%

Interoperability Demonstration 2007

Medinfo: 12th World Congress - Health Informatics



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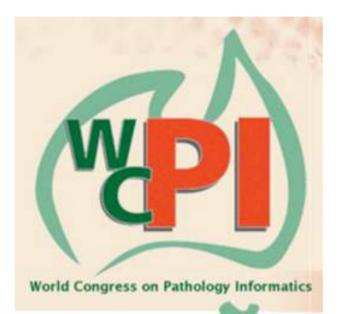












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URLs

- HISA <u>http://www.hisa.org.au/</u>
- WCPI <u>http://wcpi07.org/</u>
- Medinfo <u>http://www.medinfo2007.org/</u>
- NEHTA http://www.nehta.gov.au/
- Standards Australia <u>http://www.e-health.standards.org.au/</u>
- HL7 Australia <u>http://www.hl7.org.au/</u>
- AIHW <u>http://www.aihw.gov.au/</u>
- AAPP <u>http://www.aapp.asn.au/</u>
- AHML <u>http://www.ahml.com.au/</u>
- NPAAC
 - <u>http://www.health.gov.au/internet/wcms/publishing.nsf/Content/health-npaac-index.htm</u>
- NCCH <u>http://www.ncch.com.au/</u>
- OpenEHR <u>http://www.openehr.org/</u>
- AHIC EDSS <u>http://www2.chi.unsw.edu.au/edsse/wrapper.php</u>